WILSON

FEC ID number of contributing

Name of Employer (for Individual)

federal political committee.

SELF EMPLOYED

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:						PAGE 487 OF				609			
(check only one)													
	X	11a		11b		11c		12					
		13		14		15		16		17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) SEAL PAC SUPPORTING ELECTING AMERICAN LEADERS PAC Full Name of Individual (Last, First, Middle Initial) or Full Organization Name STUTT, WILLIAM, C, MR., Date of Receipt Mailing Address 455 COCONUT PALM RD 2021 City Zip Code State Transaction ID: AFA8B0CD986354915B0F FL **VERO BEACH** 32963 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **RETIRED** NONE Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. SUGDEN, RICHARD, , , MD Date of Receipt Mailing Address 5505 FISH CREEK RD., BOX 70 11 13 2021 City State Zip Code Transaction ID: A46258D3AE14C47109FF WILSON WY 83014 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) SELF EMPLOYED **PHYSICIAN** Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 1000.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. SUGDEN, RICHARD, , , MD Date of Receipt Mailing Address 5505 FISH CREEK RD., BOX 70 2021 City Zip Code State Transaction ID : A7069BA13B1E1415D877

Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 6000.00						
SUBTOTAL of Receipts This Page (optional)	,	Ξ	. ,	 650	0.00		
TOTAL This Period (last page this line number				 _	<u>~</u>	\square	

83014

Occupation (for Individual)

PHYSICIAN

WY

C

5000.00

Amount of Each Receipt this Period

Memo Item

PARTIAL REFUND PENDING